ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	Dail		, ,
FORMALITY REVIEW	(IUH	61477	03/13/02
RESPONSE FORMALITY REVIEW			1-80/

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷						
Claim	Date	Claim	Date	Claim	Date	
Final		Original 151		Original 101		
3 3		52 53		102		
9 4 7 5 9 6		54 55 56		104 105		
7 7 5 8 9 9		57 58		107		
10/10/		59 60 61		110		
7) 11 13 12 13 13 14 14		62 63		112 113		
14 14 15 14 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		64 65 66 66 66 66 66 66 66 66 66 66 66 66		114 115 116		
7 (7) 4 (18) 4 (19)		67 68		117		
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37 38 39		87 88 89		137 138		
40		90		140		
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47 48 49		97 98		147		
50		99		149		

If more than 150 claims or 10 actions staple additional sheet here

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